

CITY OF GROVE CITY

4035 Broadway Grove City, Ohio 43123 (614) 277-3000 Fax (614) 277-3011 www.br.grove-city.oh.us

METHOD OF ZONING CHANGE REVERSION OF ZONING CLASSIFICATION APPLICATION FEE \$100.00

Date Submitted	
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PROJECT INFORM	IATION			
PROJECT NAME	Harvey Ha	mes Communi	tu 110.	
PROPERTY LOCATION/AL	DDRESS 1566 HANGE	Rd Guya ail	1, ONIO 43123	
PARCEL TAX ID #			7 , UNIO 45105	
EXISTING ZONING	13412 , 640 -013413	PROPOSED ZONING		
PROPERTY OWNER('S)	OF 1 .	SFJ		
	Lawrence Gohri			
DAVEN TE TELEPHONE	641 WINDSOY AUC FAX NUMBER	Columbus, Ohi	0 43219	
DAYTIME TELEPHONE (114) 800-8336	() ()	' E-M	agohring L& aol. com	
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APPLICANT/AGEN	T			
NAME OF APPLICANT	Lawrence Gohri	v) C		
MAILING ADDRESS	HILL WINDSON WALL	a Aller has all	11A UZ1A	
DAYTIME TELEPHONE FAX NUMBER E-MAIL				
DESIGNATED CONTACT PERSON (DAYTIME TELEPHONE) LAYTY GOYTING (DWYLY) ()614-300-3334				
LAVILLE GO	inring Lowner,	1()614-800-8330		
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I, Lawrence	Coopring	, the applicant or the appli	cant's duly authorized agent, have ched exhibits, is complete and true/	
correct, to the best of my know	nts of this submittan. The information of the checklist are viewed, A completed checklist are	ation contained, including atta- nd required checklist items acc	ched exhibits, is complete and true/ companies this application.	
Site visits to the property may visit and/or photograph the pro	be necessary by City representate	ives. The Owner/Applicant he	ereby authorizes representatives to	
Signature of Applicant		Dat	te	
Signature of Owner				
_	017			
FOR OFFICE USE O	NI V			
DATE RECEIVED	PAYMENT IOO	RECEIVED BY	CHECK#	
9/30//4 DATE SCHEDULED FOR	RECEIVED/AMOUNT PUD FINDING MET	APPROVED PLAN	TEXT INCLUDED	
PC 11/4/14	YES NO	ATTACHED YES NO	YES NO	
PROJECT ID #		PLANNING COMMISSIO		